

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>May</i>		<i>5/17/90</i>
O.I.P.E. CLASSIFIER		<i>7</i>	<i>5-24-90</i>
FORMALITY REVIEW	<i>P</i>	<i>711690</i>	<i>5/28</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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9	✓
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Claim	Date
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